

Arizona Department of Transportation
Motor Vehicle Division
Central Communications Unit Supervisor
P.O. Box 2100, Mail Drop 554-M
Phoenix, Arizona 85001-2100

RELEASE OF LIEN

RESPONSIBLE PARTY:

VICTIM'S NAME

VICTIM'S ADDRESS

CITY, STATE ZIP

VICTIM'S PHONE NUMBER

REGARDING:

Defendant:

Defendant's Address:

Defendant's Date of Birth:

☐ Release ALL liens

☐ Release only the vehicle listed below:

Vehicle Description:

VIN:

License:

Dear Sir or Madam:

Please release the Restitution Lien on the above listed defendant's titled motor vehicle[s].

Victim/Lienholder's Signature

Victim/Lienholder's Printed Name

Lienholder

_____, 20____